Introduced by Senator Alarcon

January 18, 2005

An act relating to Medi-Cal.

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LEGISLATIVE COUNSEL'S DIGEST

SB 100, as introduced, Alarcon. Medi-Cal reimbursement: emergency and trauma care.

Existing law provides for the Medi–Cal program, which is administered by the State Department of Health Services and under which qualified low-income persons receive health care services.

This bill would state the intent of the Legislature to increase Medi-Cal reimbursement to a more appropriate rate, particularly with respect to emergency and trauma care.

Vote: majority. Appropriation: no. Fiscal committee: no. State-mandated local program: no.

The people of the State of California do enact as follows:

- 1 SECTION 1. (a) The Legislature finds and declares all of the following:
- 3 (1) Access to health care is necessary for the health, welfare,
 4 and safety of all California residents.
 - (2) Under state and federal law, all persons seeking emergency care must be provided emergency care without regard to their ability to pay. Thus, emergency care is the only source of guaranteed patient care for millions of underinsured and uninsured Californians.
- 10 (3) About 20 percent of California residents are uninsured, that 11 is about 6.1 million. Given that about 40 percent of emergency 12 room visits are by uninsured and indigent patients, lack of health

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insurance is fundamental to a growing emergency room and trauma crisis.

- (4) Over 80 percent of all Medi–Cal and uninsured patient visits to the emergency department are for conditions that could have been treated in nonemergency care or outpatient environments.
- (5) In the absence of health insurance for millions of uninsured Californians, the hospital emergency department will remain a primary source of ambulatory services for this segment of the population.
- (6) Medi–Cal reimbursements provide opportunities for hospitals, emergency rooms, and trauma centers to recoup expenses for treating low-income individuals.
- (7) California ranks 51st in per beneficiary Medi–Cal reimbursement.
- (8) In 2001, emergency rooms had 10 million visits and are expected to have 12 million visits per year by 2006.
- 18 (b) It is thereby the intent of the Legislature to enact 19 legislation to increase Medi–Cal reimbursement to a more 20 appropriate rate, particularly with respect to emergency and 21 trauma care.